

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

**10/519236**

FILING DATE

Winston Alvarado  
Paternal Stage Processing  
Paternal Specialist  
(703) 305-6421

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51						
2		/					52						
3	/						53						
4		/					54						
5		2					55						
6		1					56						
7		1					57						
8	/						58						
9	/						59						
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45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	6	↓		↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	7	←		←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	13						TOTAL CLAIMS						